

ISSUE SLIP STARTING AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NUR	32	09/18/01
O.I.P.E. CLASSIFIER	SEN	32	9/27
FORMALITY REVIEW	CA ST	207/47 1021	10/15/01 6/11/02

INDEX OF CLAIMS

+ ..... Rejected  
 + ..... Allowed  
 + (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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20816  
 10/15/01  
 SEN  
 01/17/02